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SERIAL NUMBER 10/533,846	FILING OR 371(c) DATE 11/11/2005 RULE	CLASS 623	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. LDR/10/US / AK 159656
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APPLICANTS

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** CONTINUING DATA ***** AY

This application is a 371 of PCT/IB03/04872 10/31/2003

** FOREIGN APPLICATIONS ***** AY

** SMALL ENTITY **

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 4	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: AY				

ADDRESS

36485

TITLE

Intervertebral disk prosthesis

FILING FEE RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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